



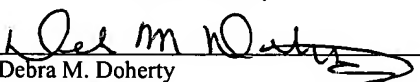
1FW\$

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Christopher T. Zirps et al. CONF. NO.: 8184  
SERIAL NO.: 10/656,557 GROUP NO.: 3739  
FILING DATE: September 5, 2003 EXAMINER: Beverly Meindl  
Flanagan  
TITLE: ENDOSCOPIC ACCESSORY MOUNTING ADAPTOR

CERTIFICATE OF FIRST CLASS MAILING UNDER 37 C.F.R. 1.8

I hereby certify that this correspondence, and any document(s) referred to as enclosed herein, is/are being deposited with the United States Postal Service as first class mail, postage prepaid, in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this 23<sup>rd</sup> day of November, 2005.

  
Debra M. Doherty

MAIL STOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing is/are the following document(s):

1. Petition for 3 Month Extension of Time,
2. Fee Transmittal,
3. Amendment and Reply
4. Check for \$1,020.00 and
5. Return Postcard

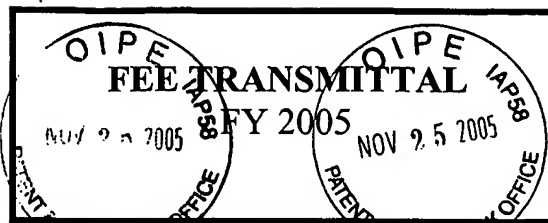
If the enclosed papers are considered incomplete, the Mail Room or other persons are respectfully requested to contact the undersigned collect at (617) 261-3100.

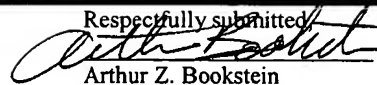
A check in the amount of \$1,020.00 is enclosed to cover the filing fee. If the fee is insufficient, the balance may be charged to the account of the undersigned, Deposit Account No. 50-1721 Reference No. B0751/7034. A duplicate of this letter is enclosed for accounting purposes.



Arthur Z. Bookstein  
Reg. No.: 22,958  
KIRKPATRICK & LOCKHART  
NICHOLSON GRAHAM LLP  
75 State Street  
Boston, Massachusetts 02109-1808  
Customer No.: 022832  
Tel.: (617) 261-3100

DATE: November 23, 2005

|  |  |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
|--|--|---------------------------|------------|-------------|-------------------|----------------------|----------------------|----------------|------|---------------|-------------------------|---------------------|------------|
|  <p><b>OIPF FEE TRANSMITTAL</b><br/>NOV 2 5 2005</p> | <p style="text-align: right;"><i>Complete if Known</i></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td>Application Serial Number</td> <td>10/656,557</td> </tr> <tr> <td>Filing Date</td> <td>September 5, 2003</td> </tr> <tr> <td>First Named Inventor</td> <td>Christopher T. Zirps</td> </tr> <tr> <td>Group Art Unit</td> <td>3739</td> </tr> <tr> <td>Examiner Name</td> <td>Beverly Meindl Flanagan</td> </tr> <tr> <td>Attorney Docket No.</td> <td>B0751/7034</td> </tr> </table> | Application Serial Number | 10/656,557 | Filing Date | September 5, 2003 | First Named Inventor | Christopher T. Zirps | Group Art Unit | 3739 | Examiner Name | Beverly Meindl Flanagan | Attorney Docket No. | B0751/7034 |
| Application Serial Number  | 10/656,557   |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
| Filing Date  | September 5, 2003  |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
| First Named Inventor   | Christopher T. Zirps   |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
| Group Art Unit   | 3739   |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
| Examiner Name  | Beverly Meindl Flanagan  |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |
| Attorney Docket No.  | B0751/7034   |                           |            |             |                   |                      |                      |                |      |               |                         |                     |            |

| <p style="text-align: center;"><b>METHOD OF PAYMENT</b></p> <p>1. <input checked="" type="checkbox"/> Payment Enclosed:<br/> <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p> <p>2. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-1721.<br/> <input type="checkbox"/> Required Fees (copy of this sheet enclosed).<br/> <input checked="" type="checkbox"/> Additional fee required under 37 CFR 1.16 and 1.17.<br/> <input checked="" type="checkbox"/> Overpayment Credit.</p> <p>3. <input type="checkbox"/> Applicant claims small entity status.</p> <p style="text-align: center;"><b>FEE CALCULATION</b></p> <p><b>1. FILING/SEARCH/EXAM/SIZE FEES</b></p> <table style="width: 100%;"> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Fee (\$)</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <td>300</td> <td></td> <td>Utility filing fee</td> <td></td> </tr> <tr> <td>500</td> <td></td> <td>Utility search fee</td> <td></td> </tr> <tr> <td>200</td> <td></td> <td>Utility exam fee</td> <td></td> </tr> <tr> <td>250</td> <td></td> <td>Utility size fee (each add'l 50 pgs. over 100)</td> <td></td> </tr> <tr> <td>200</td> <td></td> <td>Design filing fee</td> <td></td> </tr> <tr> <td>100</td> <td></td> <td>Design search fee</td> <td></td> </tr> <tr> <td>130</td> <td></td> <td>Design exam fee</td> <td></td> </tr> <tr> <td>250</td> <td></td> <td>Design size fee (each add'l 50 pgs. over 100)</td> <td></td> </tr> </table><br><table style="width: 100%;"> <tr> <th style="text-align: left;">Total Claims</th> <th style="text-align: left;">Number Filed</th> <th style="text-align: left;">Number Extra</th> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Amount</th> </tr> <tr> <td></td> <td>- 20 =</td> <td></td> <td>x \$ 50.00 =</td> <td></td> </tr> <tr> <td>Independent Claims</td> <td>- 3 =</td> <td></td> <td>x \$ 200.00 =</td> <td></td> </tr> </table> <p><input type="checkbox"/> Multiple Dependent Claim(s), if any \$360.00 =</p> <p style="text-align: right;">TOTAL: (\$)</p> <p style="text-align: right;">SMALL ENTITY DISCOUNT: (\$)</p> <p style="text-align: right;">SUBTOTAL (1) (\$)</p> <p><b>2. AMENDMENT CLAIM FEES</b></p> <table style="width: 100%;"> <tr> <th style="text-align: left;">Claims</th> <th style="text-align: left;">Highest No. Remaining After Amend.</th> <th style="text-align: left;">Present Previously Paid For</th> <th style="text-align: left;">Rate</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <td>Total 14</td> <td>- 20 =</td> <td>0</td> <td>x \$ 50.00 =</td> <td>0.00</td> </tr> <tr> <td>Indep. 3</td> <td>- 3 =</td> <td>0</td> <td>x \$ 200.00 =</td> <td>0.00</td> </tr> </table> <p><input type="checkbox"/> First Presentation of Multiple Dep. Claim + \$ 360.00 =</p> <p style="text-align: right;">TOTAL: (\$)</p> <p style="text-align: right;">SMALL ENTITY DISCOUNT: (\$)</p> <p style="text-align: right;">SUBTOTAL (2) (\$)</p> | Large Entity  | Fee (\$)   | Fee Description | Fee Paid | 300 |  | Utility filing fee |  | 500 |  | Utility search fee |  | 200 |  | Utility exam fee |  | 250 |  | Utility size fee (each add'l 50 pgs. over 100) |  | 200 |  | Design filing fee |  | 100 |  | Design search fee |  | 130 |  | Design exam fee |  | 250 |  | Design size fee (each add'l 50 pgs. over 100) |  | Total Claims | Number Filed | Number Extra | Rate | Amount |  | - 20 = |  | x \$ 50.00 = |  | Independent Claims | - 3 = |  | x \$ 200.00 = |  | Claims | Highest No. Remaining After Amend. | Present Previously Paid For | Rate | Fee Paid | Total 14 | - 20 = | 0 | x \$ 50.00 = | 0.00 | Indep. 3 | - 3 = | 0 | x \$ 200.00 = | 0.00 | <p style="text-align: center;"><b>FEE CALCULATION (continued)</b></p> <p><b>3. ADDITIONAL FEES</b></p> <table style="width: 100%;"> <tr> <th style="text-align: left;">Large Entity</th> <th style="text-align: left;">Small Entity</th> <th style="text-align: left;">Fee Description</th> <th style="text-align: left;">Fee Paid</th> </tr> <tr> <td>130</td> <td>65</td> <td>Surcharge - late filing fee or oath</td> <td></td> </tr> <tr> <td>50</td> <td>25</td> <td>Surcharge - late provisional filing fee or cover sheet</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Non-English specification</td> <td></td> </tr> <tr> <td>2,520</td> <td>2,520</td> <td>Request for ex parte reexamination</td> <td></td> </tr> <tr> <td>120</td> <td>60</td> <td>Extension for reply within first month</td> <td></td> </tr> <tr> <td>450</td> <td>225</td> <td>Extension for reply within second month</td> <td></td> </tr> <tr> <td>1020</td> <td>510</td> <td>Extension for reply within third month</td> <td>1,020.00</td> </tr> <tr> <td>1590</td> <td>795</td> <td>Extension for reply within fourth month</td> <td></td> </tr> <tr> <td>2160</td> <td>1080</td> <td>Extension for reply within fifth month</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Notice of Appeal</td> <td></td> </tr> <tr> <td>500</td> <td>250</td> <td>Filing a brief in support of an appeal</td> <td></td> </tr> <tr> <td>1000</td> <td>500</td> <td>Request for oral hearing</td> <td></td> </tr> <tr> <td>400</td> <td>400</td> <td>Petitions to the Commissioner (Gp. I)</td> <td></td> </tr> <tr> <td>200</td> <td>200</td> <td>Petitions to the Commissioner (Gp. II)</td> <td></td> </tr> <tr> <td>130</td> <td>130</td> <td>Petitions to the Commissioner (Gp. III)</td> <td></td> </tr> <tr> <td>180</td> <td>180</td> <td>Submission of Information Disclosure Statement</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>Filing a submission after final rejection (37 CFR 1.129(a))</td> <td></td> </tr> <tr> <td>790</td> <td>395</td> <td>For each additional invention to be examined (37 CFR 1.129(b))</td> <td></td> </tr> <tr> <td>100</td> <td>100</td> <td>Certificate of Correction for applicant's error</td> <td></td> </tr> <tr> <td>130</td> <td>65</td> <td>Submission of Terminal Disclaimer</td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td></td> <td></td> </tr> <tr> <td colspan="2">Other fee (Specify)</td> <td></td> <td></td> </tr> </table> <p style="text-align: right;"><b>SUBTOTAL (3) (\$)</b></p> <p style="text-align: right;">SUBTOTAL (1) 0.00</p> <p style="text-align: right;">SUBTOTAL (2) 0.00</p> <p style="text-align: right;">SUBTOTAL (3) 1,020.00</p> <p style="text-align: right;"><b>TOTAL (\$)</b></p> | Large Entity | Small Entity | Fee Description | Fee Paid | 130 | 65 | Surcharge - late filing fee or oath |  | 50 | 25 | Surcharge - late provisional filing fee or cover sheet |  | 130 | 130 | Non-English specification |  | 2,520 | 2,520 | Request for ex parte reexamination |  | 120 | 60 | Extension for reply within first month |  | 450 | 225 | Extension for reply within second month |  | 1020 | 510 | Extension for reply within third month | 1,020.00 | 1590 | 795 | Extension for reply within fourth month |  | 2160 | 1080 | Extension for reply within fifth month |  | 500 | 250 | Notice of Appeal |  | 500 | 250 | Filing a brief in support of an appeal |  | 1000 | 500 | Request for oral hearing |  | 400 | 400 | Petitions to the Commissioner (Gp. I) |  | 200 | 200 | Petitions to the Commissioner (Gp. II) |  | 130 | 130 | Petitions to the Commissioner (Gp. III) |  | 180 | 180 | Submission of Information Disclosure Statement |  | 790 | 395 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 790 | 395 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 100 | 100 | Certificate of Correction for applicant's error |  | 130 | 65 | Submission of Terminal Disclaimer |  | Other fee (Specify) |  |  |  | Other fee (Specify) |  |  |  |
|---|---|--|-----------------|----------|-----|--|--------------------|--|-----|--|--------------------|--|-----|--|------------------|--|-----|--|--|--|-----|--|-------------------|--|-----|--|-------------------|--|-----|--|-----------------|--|-----|--|---|--|--------------|--------------|--------------|------|--------|--|--------|--|--------------|--|--------------------|-------|--|---------------|--|--------|------------------------------------|-----------------------------|------|----------|----------|--------|---|--------------|------|----------|-------|---|---------------|------|--|--------------|--------------|-----------------|----------|-----|----|-------------------------------------|--|----|----|--|--|-----|-----|---------------------------|--|-------|-------|------------------------------------|--|-----|----|--|--|-----|-----|---|--|------|-----|--|----------|------|-----|---|--|------|------|--|--|-----|-----|------------------|--|-----|-----|--|--|------|-----|--------------------------|--|-----|-----|---------------------------------------|--|-----|-----|--|--|-----|-----|---|--|-----|-----|--|--|-----|-----|---|--|-----|-----|--|--|-----|-----|---|--|-----|----|-----------------------------------|--|---------------------|--|--|--|---------------------|--|--|--|
| Large Entity  | Fee (\$)  | Fee Description  | Fee Paid        |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 300   |   | Utility filing fee   |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 500   |   | Utility search fee   |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 200   |   | Utility exam fee   |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 250   |   | Utility size fee (each add'l 50 pgs. over 100)                 |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 200   |   | Design filing fee  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 100   |   | Design search fee  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 130   |   | Design exam fee  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 250   |   | Design size fee (each add'l 50 pgs. over 100)                  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Total Claims  | Number Filed  | Number Extra   | Rate            | Amount   |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
|   | - 20 =  |  | x \$ 50.00 =    |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Independent Claims  | - 3 =   |  | x \$ 200.00 =   |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Claims  | Highest No. Remaining After Amend.  | Present Previously Paid For                                    | Rate            | Fee Paid |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Total 14  | - 20 =  | 0  | x \$ 50.00 =    | 0.00     |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Indep. 3  | - 3 =   | 0  | x \$ 200.00 =   | 0.00     |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Large Entity  | Small Entity  | Fee Description  | Fee Paid        |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 130   | 65  | Surcharge - late filing fee or oath                            |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 50  | 25  | Surcharge - late provisional filing fee or cover sheet         |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 130   | 130   | Non-English specification                                      |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 2,520   | 2,520   | Request for ex parte reexamination                             |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 120   | 60  | Extension for reply within first month                         |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 450   | 225   | Extension for reply within second month                        |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 1020  | 510   | Extension for reply within third month                         | 1,020.00        |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 1590  | 795   | Extension for reply within fourth month                        |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 2160  | 1080  | Extension for reply within fifth month                         |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 500   | 250   | Notice of Appeal   |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 500   | 250   | Filing a brief in support of an appeal                         |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 1000  | 500   | Request for oral hearing                                       |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 400   | 400   | Petitions to the Commissioner (Gp. I)                          |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 200   | 200   | Petitions to the Commissioner (Gp. II)                         |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 130   | 130   | Petitions to the Commissioner (Gp. III)                        |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 180   | 180   | Submission of Information Disclosure Statement                 |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 790   | 395   | Filing a submission after final rejection (37 CFR 1.129(a))    |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 790   | 395   | For each additional invention to be examined (37 CFR 1.129(b)) |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 100   | 100   | Certificate of Correction for applicant's error                |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| 130   | 65  | Submission of Terminal Disclaimer                              |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Other fee (Specify)   |   |  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| Other fee (Specify)   |   |  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |
| <p style="text-align: center;"><b>CORRESPONDENCE ADDRESS</b></p> <p>Direct all correspondence to:</p> <p style="text-align: center;">Patent Administrator<br/> Kirkpatrick &amp; Lockhart Nicholson<br/> Graham LLP<br/> 75 State Street<br/> Boston, MA 02109-1808<br/> Tel. No.: (617) 261-3100<br/> Fax No.: (617) 261-3175</p>  | <p style="text-align: center;"><b>SIGNATURE BLOCK</b></p> <p>Date: 11/23/2005<br/> Reg. No.: 22,958<br/> Tel. No.: (617) 261-3100<br/> Fax No.: (617) 261-3175</p> <p style="text-align: right;">Respectfully submitted,<br/> <br/> Arthur Z. Bookstein<br/> Attorney for the Applicants<br/> Kirkpatrick &amp; Lockhart Nicholson<br/> Graham LLP<br/> 75 State Street<br/> Boston, MA 02109-1808</p> |  |                 |          |     |  |                    |  |     |  |                    |  |     |  |                  |  |     |  |  |  |     |  |                   |  |     |  |                   |  |     |  |                 |  |     |  |   |  |              |              |              |      |        |  |        |  |              |  |                    |       |  |               |  |        |                                    |                             |      |          |          |        |   |              |      |          |       |   |               |      |  |              |              |                 |          |     |    |                                     |  |    |    |  |  |     |     |                           |  |       |       |                                    |  |     |    |  |  |     |     |   |  |      |     |  |          |      |     |   |  |      |      |  |  |     |     |                  |  |     |     |  |  |      |     |                          |  |     |     |                                       |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |     |  |  |     |     |   |  |     |    |                                   |  |                     |  |  |  |                     |  |  |  |